

# GIC Health Plan Rates – Monthly Rates as of July 1, 2010

## For GROTON-DUNSTABLE REGIONAL SCHOOL DISTRICT ENROLLEES



### Active Employees, Retirees, and Survivors *WITHOUT MEDICARE*

*Includes 0.33% Administrative Fee*



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	15%	\$ 62.43	\$149.84
Fallon Community Health Plan Select Care	15%	74.89	179.74
Harvard Pilgrim Independence Plan	15%	90.75	221.66
Harvard Pilgrim Primary Choice Plan	15%	72.02	175.92
Health New England	15%	62.31	154.45
Tufts Health Plan Navigator	15%	87.27	211.90
Tufts Health Plan Spirit	15%	69.26	168.17
NHP Care ( <i>Neighborhood Health Plan</i> )	15%	62.23	164.91
UniCare State Indemnity Plan/Basic <i>with CIC (Comprehensive)</i>	50%	403.26	941.49
UniCare State Indemnity Plan/Basic <i>without CIC (Non-Comprehensive)</i>	50%	384.68	898.38
UniCare State Indemnity Plan/ Community Choice	50%	203.98	489.55
UniCare State Indemnity Plan/PLUS	50%	281.42	671.61

### Retirees and Survivors *WITH MEDICARE*

	Retiree and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	35%	\$ 79.18
Harvard Pilgrim Medicare Enhance	35%	132.81
Health New England MedPlus	35%	127.17
Tufts Health Plan Medicare Complement	35%	123.17
Tufts Health Plan Medicare Preferred*	35%	78.13
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with CIC (Comprehensive)</i>	35%	127.14
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without CIC (Non-Comprehensive)</i>	35%	123.40

\* Rates are subject to federal approval and may change January 1, 2011.

*Rates are Calculated by the Groton-Dunstable Regional School District Human Resources Office.*

**Rate questions? Call: 978.722.1107**